F-169

RECEIVED CENTRAL FAX CENTER

NUV 0 8 2004

NUV U 8 ZUU4 PTC/S8/22 (10-04)
Approved for use through 07/31/2006, ONB 0651-0031
U.S. Patents and Treatemark Office; U.S. DEPARMENT OF COMMERCE
Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMS control number.

PE	TITION	FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)				
		FY 2005 (fees effective on or after October 1, 2004)	093/030P				
Арр	lication	Number 10/810,311	Filed	March 26, 2004			
For New Protocols for Making Hepatocytes from Embryonic Stem Cells							
Art	Unit	1636	Examiner	to be assigned			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
		<u>Fee</u>	Small Entity Fe	e			
		One month (37 CFR 1.17(a)(1)) \$110	\$55	s			
		Two months (37 CFR 1.17(a)(2)) \$430	\$215	5			
	~	Three months (37 CFR 1.17(a)(3)) \$980	\$490	s <u>(490)</u>			
		Four months (37 CFR 1.17(a)(4)) \$1530	\$765	s			
		Five months (37 CFR 1.17(a)(5)) \$2080	\$1040	s			
	Applicant claims small entity status. See 37 CFR 1.27.						
	A check in the amount of the fee is enclosed.						
	Payment by credit card. Form PTO-2038 is attached.						
	The Director has already been authorized to charge fees in this application to a Deposit Account.						
V	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment,						
	•			cate copy of this sheet:			
WARNING: Information on this form may become public. Credit card information should not be included on Provide crodit card information and authorization on PTO-2038.							
lan	n the						
		16 1					
		Statement under 37 CFR 3.73(b) is enclosed attorney or agent of record. Registration Number					
		attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34					
-		Signature	<u> Nov</u>	B/O4			
		. Michael Schiff	/AF	0) 473-7715			
-	Typed or printed name		(650) 473-7715 Telephone Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total of One form is submitted.							

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.13 red 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the smount of the yeu require to complete since the submitted by the the subm

If you need assistance in completing the form, call 1-800-PTO-9159 and select option 2.

T-467 P.004 RECEIVED **CENTRAL FAX CENTER**

NOV 0 8 2004
PTO/SB/22 (10-04)
Approved for use through 07/81/2006 ONB 0651-0091
U.S. Peters and Trademark Cifere U.S. DEPARKENT OF COMMERCE
Under the paperwork Reduction Act of 1995, no persons are required to respect to a collection of information unless if displays a valid OMB control number.

PET	FITION	FOR EXTENSION OF TIME UNDER 37 CFR 1.138(a)	Docket Number (Optional)				
_		FY 2005 (1998 effective on or after October 1, 2004)	093/030P				
Appl	lication .	Number 10/810,311	Filed	March 26, 2004			
For New Protocols for Making Hepatocytes from Embryonic Stem Cells							
Art L	Jnit	1636	Examiner	to be assigned			
abbit	icator.	uest under the provisions of 37 CFR 1.138(a) to extend the per		•			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
	_	<u>Ege</u>	Small Entity F	<u>00</u>			
		One month (37 CFR 1.17(a)(1)) \$110	\$55	\$			
		Two months (37 CFR 1.17(a)(2)) \$430	\$215	\$			
		Three months (37 CFR 1.17(a)(3)) \$980	\$490	s <u>490</u>			
•		Four months (37 CFR 1.17(a)(4)) \$1530	\$765	s			
		Five months (37 CFR 1.17(a)(5)) \$2080	\$1040	. \$			
	Applicant claims small entity status. See 37 CFR 1.27.						
	A che	:k in the amount of the fee is enclosed. $m{ au}$	ים יחו וו	***			
	Paym	ent by credit card. Form PTO-2038 is attached.	UPLICA	TF			
	The Director has already been authorized to charge fees in this application to a Deposit Account.						
The Director is hereby authorized to charge any fees which may be required, or credit any overpay.							
	to Deposit Account Number 07-1139 . I have enclosed a duplicate copy of this shee WARNING: Information on this form may become public. Credit card information should not be included on this form.						
	Provide	credit card information and authorization on PTO-2038.	manou subaid vôt t	se included on this form.			
l am	the	applicant/inventor.					
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
		attorney or agent of record. Registration Number	•	- *-			
		attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34		<u>.</u>			
		What	γP	u 8/34			
_		Signiture		Oale			
_		J. Michael Schiff	(6:	50) 473-7715			
_		Typod or printed name	Te	lephone Number			
NOTE: Signatures of all the inventoral or easignous of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one alignature is required, see below.							
Ø	Total e						
iis colle	ction of in	ormation is required by 37 CFR 1.136(a). The information is required to obtain or	rotain a bonofit by the p	wallo which is to file (and by the			

USPTO to process) an application. Comfidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.13 and 1.14. This collection is estimated to take of minutes to complete, including gathering, propering, and submitting the completed application form to the USPTO. Time will vary depending upon the including case, Any comments on the smouth of time you require to templete this form ander suggestions for reducing this burdon, should be early to their information Officer, U.S. Peters and Teachmark Officer, U.S. Department of Commercial PLOS and Teach Advanced (A. V. 2013-1446). ON NOT CEND THIS OF COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1480, Alexandria, VA 22313-1460.

If you need sysistance in completing the form, self 1-800-PYO-9199 and select option 2.